

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of Nan Hayworth

Full Name (Last, First, Middle Initial)

NILO E. HERRERA

A.

Mailing Address 358 GRAPE HOLLOW ROAD

City

HOLMES

State

NY

Zip Code

12531-5426

FEC ID number of contributing
federal political committee.

C

Name of Employer

MOUNT KISCO MEDICAL GROUP

Occupation

PHYSICIAN

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2060.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2012

Transaction ID : SA11.5281

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JOHN HOUSE

B.

Mailing Address 1713 DOWLING DRIVE

City

IRVING

State

TX

Zip Code

75038-5949

FEC ID number of contributing
federal political committee.

C

Name of Employer

USMD

Occupation

CHAIRMAN & CEO

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		02		2012

Transaction ID : SA11.5162

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JOHN JEFFERS

C.

Mailing Address 708 ROARING SPRINGS RD

City

FORT WORTH

State

TX

Zip Code

76114-4422

FEC ID number of contributing
federal political committee.

C

Name of Employer

MCNT

Occupation

PHYSICIAN

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		02		2012

Transaction ID : SA11.5158

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00